

Lincoln Police Department James Peschong, Chief of Police 575 South 10th Street Lincoln, Nebraska 68508

402-441-7204 fax: 402-441-8492



MAYOR CHRIS BEUTLER

lincoln.ne.gov

December 4, 2012

Mayor Beutler and City Council City of Lincoln City County Building Lincoln, NE

Mayor Beutler and Members of the City Council:

An investigation has been made regarding the application of One More Bar, 836 North 70<sup>th</sup> Street requesting a class C liquor license.

Theresa Dattola, owner has requested that she be approved as the manager of the liquor license.

Background information on the applicant is as follows:

Theresa Dattola was born in Rhode Island. She attended Lincoln Southeast High School graduating in 1983.

Theresa Dattola employment history is as follows:

1997 - Present

Bartender, Foxy Lady

Lincoln, NE.

1995 - Present

Accounts Payable, Whitehead Oil

Lincoln, NE.

The required training will be completed on December 13<sup>th</sup> 2012.

If this application is approved, it should be with the understanding that it conforms to all the rules and regulations of Lincoln, Lancaster County and the State of Nebraska.

JIM PESCHONG, Chief of Police

### MECHIVED

1	PREMISE INFORMATION	
V	Trade Name (doing business as) Doe More Bar	NOV 27 207
	Street Address #1_83ic N -10 <sup>th</sup>	NEPRASKA LIQUOR
	Street Address #2	CONTROL COMMISSION
	City Lancaste	z 2ip Code 68505
1	Premise Telephone number 472 - 489 - 0555	
I	Is this location inside the city/village corporate limits:	S <sub>W</sub> D NO
	Mailing address (where you want to receive mail from the Commission)	
\ \ !	Name Abby Normal Inc	
4	Street Address #1 936 Nt. 1032 Touzalin	Aye
	Street Address #2	
	City Lincoln State NE	Zip Code Lox507
1	area, sales areas and areas where consumption or sales of alcohol will take provered by the license, you must still include dimensions (length x width) of the entire building. No blue prints please. Be sure to indicate the direction north a **For on-premise consumption liquor licenses minimum standards must be met by  Length feet  Width feet	the licensed area as well as the dimensions of the and number of floors of the building.  To providing at least two restrooms
1	PROVIDE DIAGRAM OF AREA TO BE LICENSED BELOW OR ATTACH SEPA	RATE SHEET
1	single story, no basement, no beer garden	
		and land
	1203	one stong building
ミエレ	4-60'-7 SOUTPI	approx 60 X 60
	7	
	- पुत्र	
	1	FORM 100 REV 11/2010 PAGE 4

### APPLICANT INFORMATION

		(mm/yyyy)	(city & state)		
					NOV 2 7 2012
a) S b) S c) S	yes, give name of bu Submit a copy of the Include a list of alcol Submit a list of the fi s premise licensed as	sales agreement hol being purchased arniture, fixtures and	, list the name bran I equipment	d, container size and how t two (2) years?	many
	YES	NO NO			
If y	es, give name and lic	cense number			
	filing a temporary or	perating permit to op	perate during the ap	oplication process?	
re you	a comporary of				
are you		NO NO			

### Manager's information must be completed below PLEASE PRINT CLEARLY Gender: )MALE FEMALE Last Name: Dattola First Name: Theresa MI: m Home Address (include PO Box if applicable): 4032 Touzalin Ave City: LINCOLN County: Lancaster Zip Code: 1-8507 Home Phone Number: 402 304 3989 Business Phone Number: 402 - 489 - 0555 Drivers License Number & State Social Security Numb NE Place Of Birth: N. Kingstown , B.T. Date Of Birth Are you married? If yes, complete spouse's information (Even if a spousal affidavit has been submitted) )YES (X)NO NOV 27 2012 Spouse's information NEBBASKA HOUD First Name: MI: Spouses Last Name: Qrivers License Number & State:\_\_\_\_\_ Social Security Number: Place Of Birth: Date Of Birth: APPLICANT & SPOUSE MUST LIST RESIDENCE(S) FOR THE PAST TEN (10) YEARS APPLICANT **SPOUSE CITY & STATE** YEAR YEAR **CITY & STATE** YEAR YEAR FROM TO **FROM** TO LINCOLD DE 1982 PRESENT

Form 103 Rev 11/2012 Page 3 of 5

### MANAGER'S LAST TWO EMPLOYERS

YEAR FROM TO	NAME OF EMPLOYER	NAME OF SUPERVISOR	TELEPHONE NUMBER
Oct 15 Present	Whitehead Oil	Todd Burgason	403 435 3509
Octo15 precent	FoxyLady	5	400 435 5943

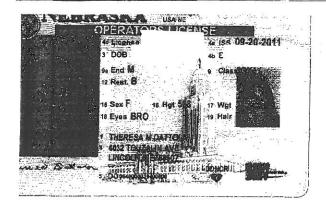
1.	READ CAREFULLY. ANSWER COMPLETELY AND ACCURATELY. Must be completed
. 7	by both applicant and spouse, unless spouse has filed an affidavit of non-participation.

Has anyone who is a party to this application, or their spouse, <u>EVER</u> been convicted of or plead guilty to any charge. Charge means any charge alleging a felony, misdemeanor, violation of a federal or state law; a violation of a local law, ordinance or resolution. List the nature of the charge, where the charge occurred and the year and month of the conviction or plea. Also list any charges pending at the time of this application. If more than one party, please list charges by each individual's name.

YES NO
If yes, please explain below of attach a ceparate age.

Name of Applicant	Date of Conviction (mm/yyyy)	Where Convicted ( city & state)	Description of Charge	Disposition
			Pro Man	
		,	N9V	
9			Marin and a second	7 2017
				A COUDR
		/		TANKE TO LIN

			****		
2.	Have you or your spou any other state? IF YES, list the name of	( )YES	proved or made ap	oplication for a liquor li	cense in Nebraska or
3.	Do you, as a manager, supervise, in person, th	qualify under No e management o	ebraska Liquor Cof the business?	ontrol Act (§53-131,01)  VES	and do you intend to
4.	Have you enclosed the (Check or money order XYES NO	required fingerp made payable to	rint cards and PR the Nebraska S	OPER FEES with this tate Patrol for \$38,00	application? per person)
5.	List any alcohol related	training and/or	experience (wher	and where).	
	Presponsible Hospi 25 yrs burtend	tality con	resent Foxul	ady & Night Befor	e Lincoln ME)



PRECINCT: 12D00 PARTY: NP THERESA M DATTOLA 4032 TOUZALIN AV

POLLING PLACE:
HAVELOCK UNITED METH CHURCH
61ST & MORRILL
FELLOWSHIP HALL

LEGIS.DISTRICT 46 SE.COM.COLLEGE 04
CO.COMMISSIONER 05 ED SERV. UNIT.
CITY COUNCIL 01 M.P.P. DISTRICT SCHOOL DISTRICT 001 N.R. DISTRICT 003
SUB SCHOOL 01 NEBR.P.P. DIST 162
UNL REGENTS 01 STATE BÖARD EDU 01
FIRE DISTRICT PAVING DISTRICT

State of Rhode Island and Providence Plantations

DEPARTMENT OF DIVISION OF HEALTH VITAL STATISTICS

Name Theresa Marie Dattola
Birth D Number 65

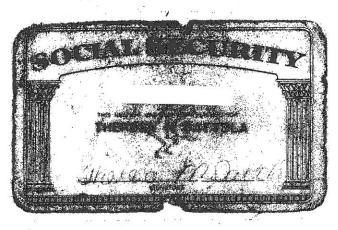
Birth Place North Kingstown Rhode Island

Sex Female Filed 9/10/65 Issued9/10/65

Issuing Office Of the Kingstown Town Clark
This is a true certification of name and birth facts recorded in this office.

NOT VALID WITHOUT OFFICIAL SEAR LAY AND MICHAEL STATE STATE OF TOWN Clark

VISIAB 25M 7.09 Dead Filed Fil



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# LINCOLN POLICE DEPARTMENT PUBLIC RECORD CRIMINAL HISTORY

This is a list of criminal citations and arrests by the Lincoln Police Department for this person since 1980.

- Arrests or citations by any other law enforcement agency are not included.
- Arrests where no charges were filed are only included during the most recent year.
- Charges that were sent to diversion are only included during the most recent 2 years.
- Charges that were dismissed are only included during the most recent 3 years.
- Any arrest over 1 year old, that has no disposition, is not included.
- Minor traffic infractions and cases when the subject was under the age of 16 or cases transferred to juvenile court are not included.

If the phrase "\*\*\*END OF LISTING\*\*\*" does not appear at the bottom of this report, then this list is not complete.

FOR: THERESA M DATTOLA, Female, DOB:

Date of listing: 10-05-2012

CODES FOR CRIMINAL HISTORY (I)=Infraction(M)=Misdemeanor(F)=Felony(O)=Other

THE LINCOLN POLICE DEPARTMENT SHOWS NO ARRESTS WITH A FINAL DISPOSITION FOR THIS PERSON.



\*\*\* END OF LISTING \*\*\*

RECEIVED

NOV 2 7 2012

NEFRACIO LOUGA



**Driver and Vehicle Records Division** 

301 Centennial Mall South, P.O. Box 94789 LINCOLN, NEBRASKA 68509-4789

(402) 471-3918 Fax (402) 471-8694

#### COMPLETE ABSTRACT OF RECORD

Print Date: 11/20/2012

Page: 01 of 01

### THERESA M DATTOLA

**Driver Licens** 

THERESA M DATTOLA

4032 TOUZALIN AVE

LINCOLN

Resident County: 02

DLN/Permit/ID Card:

Issue County: 02

AKA Name: THERESA M NOBBMAN

NE 68507

Gender: F Race: W Height: 5'08" Weight: 135 Eyes: BRO Hair: BPO

DOB:

DOB:

License Class: 0

Issued:

Expir:

Endorsements: M

Status: VALID

Restrictions: B Duplicates - 1st: 09-20-2011

I have had speeding tickets - Lancaster Co., NE but they were

too old to show on this report

In 1988 I ran a red light in Lincoln, NIE Lancouter Co.

In 1989 or 200 1990 1 cpt a park permit ticket - was

@ Pawonee Lake without proper park pemit.

RECEIVED

MOV 27 2012

MEDRASYALIOUON CONTRO DELEGISTION

This is to certify that the above is a true and correct abstract of the operating record of the above-named individual as contained in our files. Any entry for an accident which may appear above is for statistical purposes only and does not indicate a determination of fault.

Betty Johnson

Driver and Vehicle Records Division

## APPLICATION FOR LIQUOR LICENSE CORPORATION INSERT - FORM 3a

NEBRASKA LIQUOR CONTROL COMMISSION 301 CENTENNIAL MALL SOUTH PO BOX 95046 LINCOLN, NE 68509-5046 PHONE: (402) 471-2571 FAX: (402) 471-2814 Website: www.loc.ne.gov



Officers, directors and stockholders holding over 25% shares of stock, including spouses, are required to adhere to the following requirements:

- 1) All officers, directors and stockholders must be listed
- 2) President/CEO and stockholders holding over 25% and their spouse(s) (if applicable) must submit fingerprints (2 cards per person)
- 3) Officers, directors and stockholders holding over 25 % shares of stock and their spouse (if applicable) must sign the signature page of the Application for License form 100 (even if a spousal affidavit has been submitted)

	1000
Attach copy of Articles of Incorporation (Articles must show barcode receipt by Secretary of States Office)	
Name of Registered Agent: John Wobig	
Name of Corporation that will hold license as listed on the Articles	
Abby Normal, Inc.	
Corporation Address: 4032 Touzalin Ave	
City: Lincoln State: NE Zip Code: 108507	
Corporation Phone Number: 403 304 3989 Fax Number	
Total Number of Corporation Shares Issued:	
Name and notarized signature of President/CEO (Information of president must be listed on following page)	
Last Name: Dottola First Name: Theresa MI: M	
Home Address: 4033 Touzalin Ave City: Lincoln	
State: NE Zip Code: 102 507 Home Phone Number: 100 41010 8854	
Thuria Dattola Signature of President/CEO	
Signature of President/CEO	
ACKNOWLEDGEMENT	
State of Nebraska County of The foregoing instrument was acknowledged before me this	
27th day of November 212 by Theresa Dattola	
Date / name of person acknowledge	7
Affix Seal GENERAL NOTARY - State of Nebraska JILL L. NELSON	
My Coram. Exp. March 6, 2014	

been submitted)	idots including spouses (even 4/2-spousar a	Λ
Last Name: Dattola	First Name: Theresa	MI: M
Social Security Number	Date of Birth:	PY 160
Title: President	Number of Shares \ \OO %/c	
Spouse Full Name (indicate N/A if single): N	A	- Civid
Spouse Social Security Number:	Date of Birth:	, Y
Last Name: Toke Woolig	First Name: John	MI: S
Social Security Number:	Date of Birth:	
Title: Registered Agent	Number of Shares	
Spouse Full Name (indicate N/A if single): N	IA	
Spouse Social Security Number:	Date of Birth:	
		The process of the same
Last Name:	First Name:	MI:
	First Name:Date of Birth:	
	Date of Birth:	<u>- 897 37 252</u> Dream and a
Social Security Number:	Date of Birth:	<u> </u>
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Social Security Number:  Title:  Spouse Full Name (indicate N/A if single):  Spouse Social Security Number:	Date of Birth:  Number of Shares  Date of Birth:  Date of Birth:	MI:
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